ė	:	Ellective October 1, 2000								109/9/4/70					
A 45 C			AIMS	FILED (Colum	- PART in 1)	1. 2. J. 13. W.	umn 2)		TYPE	ENTITY		**OTHE SMALL	BTHAN		
	7	OTAL CLAIM	IS						RATE	FEE		RATE	2000年,广 州 城市		
	F	OR	an ika sa	NUMBER	R FILED	NUM	BER EXTRA	ŀ	BASIC FE		OR		FEE.		
-till	Ţ	OTAL CHARGI	EABLE CLÁIMS	1 d d m	inus 20=	• 111			TA CAPACI	a distribution		A CAMPANA	000		
13.50	IN	DEPENDENT	CLAIMS		ninus 3 =		I	N.	#X\$ 9≡		OR	このとものを利用が得			
	MULTIPLE DEPENDENT CLAIM PRESENT								X40=		OR	X80=	80		
ľ									+135=		OR	+270=			
	* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL		OR	TOTAL	947		
		CLAIMS AS AMENDED - PART II									_	OTHER	THAN		
li	<u>:</u>		(Column 1) CLAIMS		(Colun		(Column 3)	1 :	SMALL	ENTITY	OR	SMALL			
	AMENDMENT A		REMAINING AFTER AMENDMENT		NUME PREVICE PAID I	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	2	Total	•	Minus	**	·	æ		X\$ 9=		OR	X\$18=			
	AM	Independent	ENTATION OF N	Minus	***	-·····································	=		X40=		OR	X80=			
┞		FINOT PAES	ENTATION OF M	ULTIPLE DE	PENDENT CL	CLAIM		! <u> </u>	400		1	070			
l									+135= TOTAL	<u> </u>	OR	+270=			
İ		,	(Column 1)		(0.1			A	ADDIT. FEE	<u> </u>	OR	TOTAL ADDIT. FEE			
	2		CLAIMS		(Column 2 HIGHEST	ST	(Column 3)	1 r		1.00	, ,				
	MEN		REMAINING AFTER AMENDMENT		NUMB PREVIO PAID F	USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
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L		rinoi rnese	INTATION OF MI	JLTIPLE DEF	DEPENDENT CLAIM						OR				
							•	L	+135=		OR	+270=			
			10 1					A	TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE			
			(Column 1) CLAIMS		(Colum HIGHE		(Column 3)					•			
AMENDMENT C			REMAINING AFTER AMENDMENT		NUMBI PREVIOU PAID FO	ER JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	· ADDI- TIONAL FEE		
		Total	*	Minus	**		=		X\$ 9=	1.22	0.0	X\$18=	- 1 - 1		
	-	Independent	•	Minus	***		=	\vdash	X40=		OR				
L	1	TINO I PHESE	NTATION OF MU	ILTIPLE DEP	ENDENT (CLAIM		-	770-	 .	OR	X80=			
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.											OR	+270=			
1010 Tilgitost reditibel Previously Paid For IN THIS SPACE is less than 20 enter "20 "												TOTAL DDIT. FEE			
	- 11	ne "Highest Numi	ber Previously Paid	For" (Total or	Independen	t) is the i	nighest number	found	d in the app	ropriate box	in colu	ımn 1.			